## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

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CURRENT CORRESPOND	ENCE ADDRESS (Note: Use Blo	DADEI	s. Bach additional p	paper, su	Cii ua un usaiRmmen	domestic mailings of the any other accompanying or formal drawing, must	
456	7590 07/13/	2010	have	its own certificate of	t mailing	g or transmission.	
466	YOUNG & THOMPSON			Certife that this	iicate of Fee(s) T	Mailing or Transm Transmittal is being	ussion deposited with the United
209 Madison St			State	s Postal Service with	h suffici Stop ISS	ent postage for first UE FEE address a	deposited with the United class mail in an envelope above, or being facsimile te indicated below.
Suite 500			trans	mitted to the USPTO	5(571) 2	273-2885, on the da	te indicated below.
Alexandria, VA	22314						(Depositor's name)
							(Signature)
			<u> </u>				(Date)
APPLICATION NO.	NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/562,948 06/01/2006		Nobuyuki Takakuwa		8048-1135 8740		8740	
ITLE OF INVENTIO	N: INFORMATION REC	ORDING MEDIUM, DE	VICES AND METHODS	WITH PLAYLIST I	NFORM	IATION	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0		\$1810	10/13/2010
EXA	MINER	ART UNIT	CLASS-SUBCLASS	]			
HU	R, ECE	2175	715-716000				
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CFR 1.363).		(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a					
Address form PTO/	spondence address (or Chi SB/122) attached.						
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3				
PTO/SB/47; Rev 03 Number is require	3-02 or more recent) attac ed.	ned. Use of a Customer	listed, no name will be	printed.		J	
3. ASSIGNEE NAME	AND RESIDENCE DAT	A TO BE PRINTED ON	THE PATENT (print or ty	pe)			
PLEASE NOTE: U	Juless an assignee is iden	tified below, no assigned	e data will appear on the p	natent. If an assigne assignment.	e is ide	ntified below, the d	ocument has been filed for
(A) NAME OF AS		the flori or fire room is 1.	(B) RESIDENCE: (CIT	Y and STATE OR C	OUNTR	lY)	
		TOKYO IABAN					
PIONEER CORPORATION			TOKYO, JAPAN  rinted on the patent): Individual Corporation or other private group entity Government				
Please check the appro	opriate assignee category	or categories (will not be	printed on the patent):	Individual & Co	erporatio	a or other private gr	oup entity Car Coveranical
4a. The following feet	(s) are submitted:	,	4b. Payment of Fee(s): (Ple	ase first reapply ar	ny previ	ously paid issue fee	shown above)
S Issue Fee			A check is enclosed.				
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any				
Advance Order	- # of Copies	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 250120 (enclose an extra copy of this form).					
5. Change in Entity	Status (from status indica		(IF NECESSARY)  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).				
Amplicant of	sime SMALL ENTITY ats	nus. See 37 CFR 1.27.	b. Applicant is no lo	nger claiming SMA	LL ENT	TTY status. See 37 C	.PK 1.27(g)(2).
NOTE: The Issue Fee	and Publication Fee (if re the records of the United S	equired) will not be acceptiates Patent and Tradema	ted from anyone other than irk Office.	the applicant; a regi	istereo a	ttorney or agent; or t	the assignee or other party i
indicate and and and any	1 ^	$l \cap l$					
Authorized Signature / Senon Castle			Date August 12, 2010				
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